



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 3739

|   |   |   |                                 |  |                           |                                |
|---|---|---|---------------------------------|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/672,535  | <b>FILING or 371(c) DATE</b><br>09/26/2003<br><b>RULE</b>   | <b>CLASS</b><br>345   | <b>GROUP ART UNIT</b><br>2155   | <b>ATTORNEY DOCKET NO.</b><br>Y.BEJERANO<br>3-16-1-49-1      |                           |                                |
| <b>APPLICANTS</b><br>Yigal Bejerano, Springfield, NJ;<br>Yuri J. Breitbart, Silver Lake, OH;<br>Ariel Orda, Haifa, ISRAEL;<br>Rajeev Rastogi, New Providence, NJ;<br>Alexander Sprintson, Haifa, ISRAEL;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>12/18/2003 |   |   |                                 |  |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and /BENJAMIN R BRUCKART/<br>Acknowledged Examiner's Signature   |   | <input type="checkbox"/> Met after Allowance<br>brb<br>Initials | <b>STATE OR COUNTRY</b><br>NJ   | <b>SHEETS DRAWINGS</b><br>8                                  | <b>TOTAL CLAIMS</b><br>21 | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>HITT GAINES, PC<br>ALCATEL-LUCENT<br>PO BOX 832570<br>RICHARDSON, TX 75083<br>UNITED STATES   |   |   |                                 |  |                           |                                |
| <b>TITLE</b><br>System and method for provisioning QOS paths with restoration in a network  |   |   |                                 |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>916   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |   |                                 | <input type="checkbox"/> All Fees                            |                           |                                |
|   |   |   |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|   |   |   |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|   |   |   |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|   |   |   |                                 | <input type="checkbox"/> Other _____                         |                           |                                |
|   |   |   | <input type="checkbox"/> Credit |  |                           |                                |